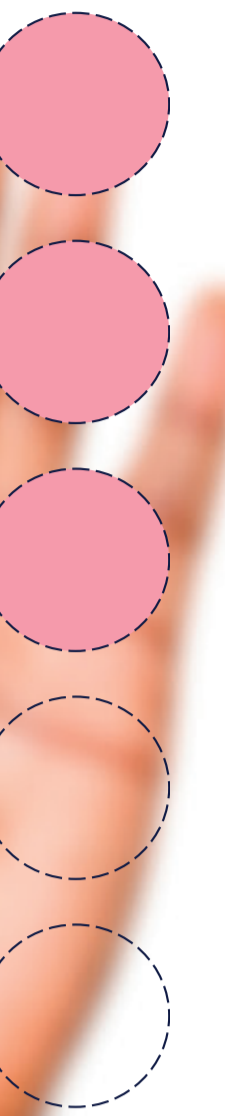




DRIED BLOOD SPOT (DBS) TESTING PILOT

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Background

Dried Blood Spot (DBS) is an innovative finger stick test for hepatitis C (HCV) RNA and HIV that can be accessed online or at participating health services. The DBS pilot was added to the mix of testing options in NSW to increase access for people who experience barriers to conventional testing services.

Sites can offer DBS testing when venepuncture is difficult due to poor venous access, or when human or physical infrastructure is limited.

The eligibility for a hepatitis C test includes people who:

- Have ever injected a drug
- Identify as Aboriginal and/or Torres Strait islander
- Are currently or have ever been incarcerated
- Are born in countries where hepatitis C is more common including countries within Africa and Eastern Mediterranean regions.

The pilot will run until December 2020.

Argument

DBS was designed for non-clinical settings and has minimal site requirements allowing testing to occur at a range of settings including needle and syringe programs (NSPs), homeless services and outreach services.

The DBS pilot can be used differently depending on the setting. Sites can opt to deliver results or for the Sexual Health Info Link - SHIL (shil.nsw.gov.au) to contact to contact patients, deliver results and link into care. This allows more flexibility for clients and provides an opportunity for non-clinical sites to partner with other services.

Updates to the Pilot

The DBS pilot commenced in 2016 to increase HIV testing and was expanded in September 2017 to include hepatitis C testing. The pilot has been amended based on feedback from participating sites to improve access for people most at risk of hepatitis C infection.

The pilots include separation of the HIV and hepatitis C tests allowing participants to opt to have a hepatitis C test with or without an HIV test, depending on the eligibility criteria met, expansion of eligibility criteria, simplified website text and registration process, translation of the website into eight languages and improved quarterly reporting to provide enhanced data for participating sites participating sites for scale up.

Results

Between September 2017 and June 2019, there were 1,606 registrations for a DBS hepatitis C test. Out of 1,441 tests completed, 206 (14 per cent) had detectable hepatitis C RNA and were linked into care.

93 per cent of hepatitis C tests completed were amongst people who reported they had ever injected drugs and 42 per cent were amongst people who identify as Aboriginal and/or Torres Strait Islander.

Disclosure of Interest Statement:

NSW Health funds St Vincent's Laboratory and SHIL to run the DBS pilot. NSW Health does not receive funding from pharmaceutical companies for HIV or hepatitis C therapies.

Figure 1: Number of DBS registrations and tests completed by quarter (November 2016 – June 2019).

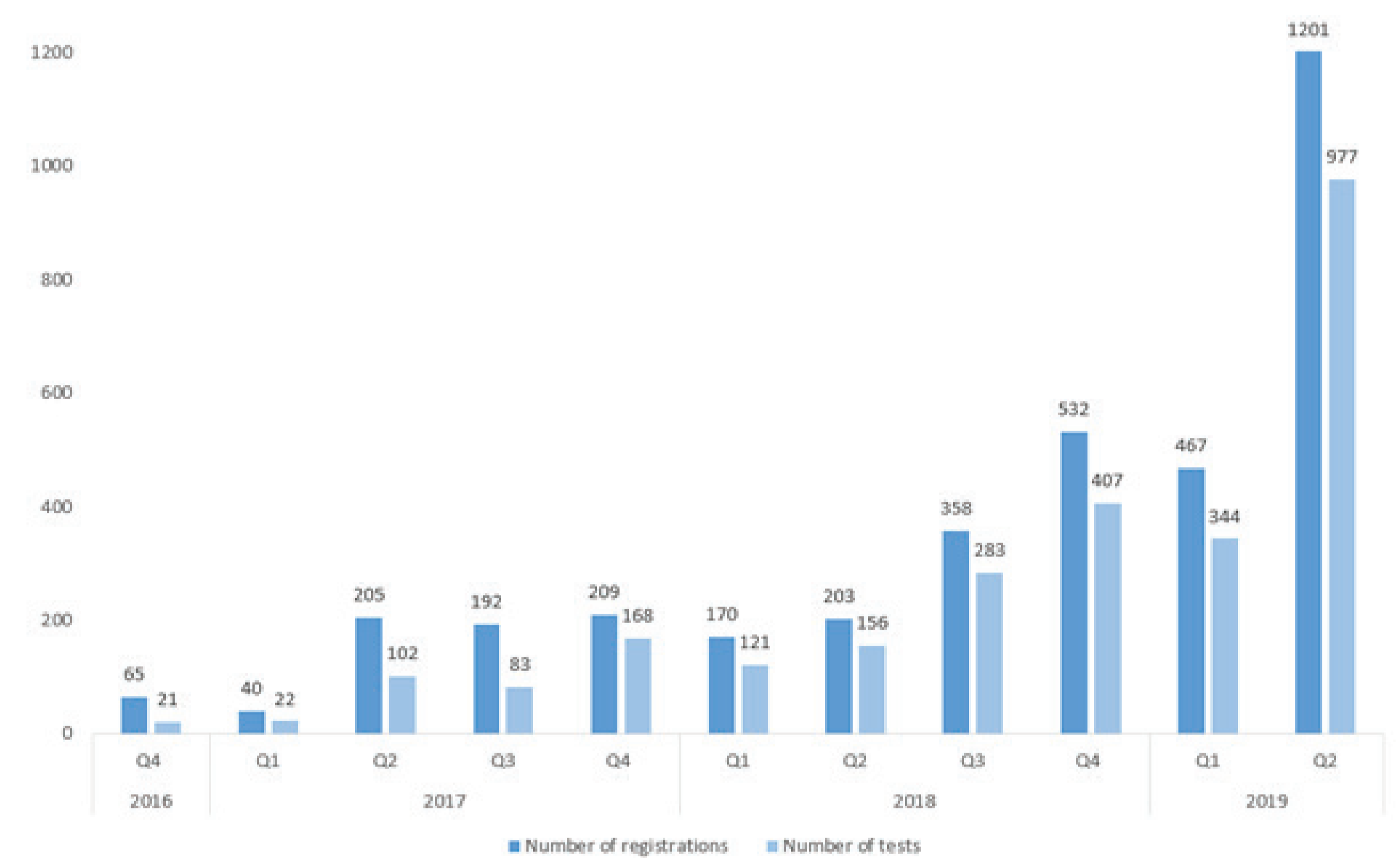


Table 1: Recruitment data for the DBS testing pilot, From November 2016 – June 2019 .

	HCV Tests	HIV Tests
Registrations	1,606	3,642
Tests completed	1,441	2,684
Return rate	90%	74%
Reactive	206	8

*Hepatitis C RNA testing and phase 2 sites introduced in September 2017.

Data sources: NSW DBS Research Database; NSW State Reference Laboratory for HIV, St Vincent's Hospital; Sexual Health Info Link.

What next?

The DBS pilot is being scaled up across NSW rural, regional and metropolitan areas as an additional testing tool in Needle and Syringe Program sites, Drug and Alcohol services and correctional facilities.

DBS offers an innovative testing model which provides equitable access for people who experience barriers to conventional health services. It provides a unique tool in achieving virtual HCV elimination in NSW by 2028.

Visit DBStest.health.nsw.gov.au or contact Nigel Carrington (nigel.carrington@health.nsw.gov.au) for more information